

Exhibit 1. This notice is filed within 30 days after service of the Complaint upon these Defendants.

2. In the following discussion of the citizenship of the parties, corporations, and members of LLC's, for the purposes of diversity, all assertions of citizenship are made as of the date the complaint was filed, May 23, 2008.
3. There is complete diversity between Plaintiff, ANN JOHNSON, and Defendants, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, SUNRISE SENIOR LIVING, INC., SUNRISE SENIOR LIVING MANAGEMENT, INC., and SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC.
4. Named Defendant, FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP, is no longer in existence, and therefore has no bearing on this Court's diversity jurisdiction over this matter. FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP was voluntarily canceled, and was issued a Certificate of Cancellation of Limited Partnership from the Office of the Secretary of State for the State of Oklahoma on June 7, 2006. **See Exhibit 2.**
5. Plaintiff, ANN JOHNSON, is a citizen of the State of Illinois.
6. Defendant, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, is a Delaware Limited Liability Company with only one member: Sunrise IV Senior Living Holdings, LLC. **See Exhibit 3.**
7. Sunrise IV Senior Living Holdings, LLC, is a Delaware Limited Liability Company (**See Exhibit 4**) with two members: Sunrise Senior Living Investments, Inc., and US Senior Living Investments, LLC.
8. Sunrise Senior Living Investments, Inc., is a corporation organized and existing under the laws of the State of Virginia, with its principal place of business in the State of Virginia. **See**

Exhibit 5.

9. US Senior Living Investments, LLC is a Delaware Limited Liability Company (**see Exhibit 6**) with only one member: GSS (US Senior Living Investments), Inc.
10. GSS (US Senior Living Investments), Inc., is a corporation organized and existing under the laws of the State of Delaware, with its principal place of business in the State of New York. **See Exhibit 7.**
11. Defendant, SUNRISE SENIOR LIVING, INC., is a corporation organized and existing under the laws of the State of Delaware, with its principal place of business in the State of Virginia. **See Exhibit 8.**
12. Defendant, SUNRISE SENIOR LIVING MANAGEMENT, INC., is a corporation organized and existing under the laws of the State of Virginia, with its principal place of business in the State of Virginia. **See Exhibit 9.**
13. Defendant, SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC is a Delaware Limited Liability Company (**see Exhibit 10**) with only two members: SZR US Investments, Inc., and Sunrise Senior Living Investments, Inc.
14. SZR US Investments, Inc., is a corporation organized and existing under the laws of the State of Delaware, with its principal place of business in the State of Kentucky. **See Exhibit 11.**
15. Sunrise Senior Living Investments, Inc., is a corporation organized and existing under the laws of the State of Virginia, with its principal place of business in the State of Virginia. **See Exhibit 5.**
16. The amount in controversy exceeds \$75,000.00, exclusive of interest and costs. Plaintiff contends that Defendants' alleged negligence caused her to endure pain, suffering and disability and to expend valuable resources and money to cure herself from injuries allegedly

inflicted by Defendants. Additionally, attached to Plaintiff's complaint is an Affidavit of Damages, wherein Plaintiff's counsel swears that Plaintiff seeks damages in excess of \$50,000.00. **See Exhibit 1.** Based on this information, there is a good faith basis to assert that the amount in controversy exceeds the jurisdictional amount.

17. The United States District Courts have original jurisdiction for this civil action under 28 USC §1332.
18. This Notice of Removal is filed in the United States District Court for the Northern District of Illinois, Western Division, which is the district and division in which the action is pending.
19. The Defendants have attached to this Notice copies of process and pleadings that have been served upon it.

WHEREFORE, Defendants, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, SUNRISE SENIOR LIVING, INC., SUNRISE SENIOR LIVING MANAGEMENT, INC., and SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC, by and through their attorneys, PRETZEL & STOUFFER, CHARTERED, pray that this cause be removed to the United States District Court for the Northern District of Illinois.

Respectfully submitted,

/s/ Daniel B. Mills
PRETZEL & STOUFFER, CHARTERED
One South Wacker Drive
Suite 2500
Chicago, IL 60606
Telephone: (312) 578-7524
Fax: (312) 346-8242
Dmills@pretzel-stouffer.com
Attorney for Defendants

263.064176 (262)

TED/sxf

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF ILLINOIS
WESTERN DIVISION

ANN JOHNSON

Plaintiff,

v.

FOUNTAINS CRYSTAL LAKE LIMITED
PARTNERSHIP, SUNRISE CRYSTAL
LAKE (LAND) SL, LLC, SUNRISE SENIOR
LIVING, INC., SUNRISE SENIOR LIVING
MANAGEMENT, INC., SUNRISE FIRST
ASSISTED LIVING HOLDINGS, LLC,

Defendants.

ATTESTATION

Daniel B. Mills, Esq, being first duly sworn on oath, deposes and states as follows:

1. He is the attorney for the defendants/petitioners, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, SUNRISE SENIOR LIVING, INC., SUNRISE SENIOR LIVING MANAGEMENT, INC., and SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC, in this cause.

2. He has prepared and read the Notice of Removal filed in this cause and has personal knowledge of the facts and matters contained in it; and

3. The facts and allegations contained in the Notice of Removal are true and correct to the best of his knowledge.

Respectfully submitted,

/s/Daniel B. Mills
PRETZEL & STOUFFER, CHARTERED
One S. Wacker Drive
Suite 2500
Chicago, IL 60606
Telephone: (312) 578-7524
Fax: (312) 346-8242
Dmills@pretzel-stouffer.com
Attorney for Defendant

EXHIBIT 1

STATE OF ILLINOIS)
) SS
COUNTY OF COOK)

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
COUNTY DEPARTMENT - LAW DEPARTMENT

ANN JOHNSON

Plaintiff,

v.

FOUNTAINS CRYSTAL LAKE LIMITED
PARTNERSHIP, a foreign limited liability
partnership, SUNRISE CRYSTAL LAKE
(LAND) SL, LLC, a foreign corporation,
SUNRISE SENIOR LIVING, INC., a foreign
corporation, SUNRISE SENIOR LIVING
MANAGEMENT, INC., a foreign corporation,
SUNRISE FIRST ASSISTED LIVING
HOLDINGS, LLC, a foreign limited liability
company,

Defendants.

2008L005738
CALENDAR/ROOM A
TIME 00:00
PI Other

Case Number:

FILED-8
JUN 23 PM 1:46
Circuit Court
Law Division

COMPLAINT AT LAW

Count I- (Negligence)

NOW COMES the Plaintiff, ANN JOHNSON, by and through her attorneys, HUNT, KAISER, ARANDA & SUBACH, LTD., and complaining of Defendants, FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP, a foreign limited liability partnership, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, a foreign corporation, SUNRISE SENIOR LIVING, INC., a foreign corporation, SUNRISE SENIOR LIVING MANAGEMENT, INC., a foreign corporation, SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC, a foreign limited liability company, (hereinafter collectively referred

to as the "SUNRISE DEFENDANTS"), and each of them, alleges as follows:

1. On May 24, 2006, FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP was a foreign limited liability partnership, licensed to do business in the State of Illinois, which owned and operated one or more offices in Cook County, Illinois, as well as the Fountains at Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, County of McHenry, State of Illinois.

2. On May 24, 2006, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, was a foreign corporation, licensed to do business in the State of Illinois, which owned and operated one or more offices in Cook County, Illinois, as well as the Fountains at Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, County of McHenry, State of Illinois.

3. On May 24, 2006, SUNRISE SENIOR LIVING, INC., was a foreign corporation, licensed to do business in the State of Illinois, which owned and operated one or more offices in Cook County, Illinois, as well as the Fountains at Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, County of McHenry, State of Illinois.

4. On May 24, 2006, SUNRISE SENIOR LIVING MANAGEMENT, INC., a foreign corporation, licensed to do business in the State of Illinois, which owned and operated one or more offices in Cook County, Illinois, as well as the Fountains at Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, County of McHenry, State of Illinois.

5. On May 24, 2006, SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC, was a foreign limited liability company, licensed to do business in the State of

Illinois, which owned and operated one or more offices in Cook County, Illinois, as well as the Fountains at Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, County of McHenry, State of Illinois.

6. On or about May 24, 2006, SUNRISE DEFENDANTS were an assisted living healthcare facility/medical professional corporation conducting healthcare facility, rehabilitation, medical, nursing and associated healthcare services and engaged on their staff various residents, nurses and other healthcare personnel.

7. That at all times relevant, SUNRISE DEFENDANTS held themselves out and represented that they had and possessed the requisite skill, competence, know-how, facilities, personnel, and information to properly treat Plaintiff, ANN JOHNSON.

8. That on or about May 24, 2006, Plaintiff, ANN JOHNSON, then 92 years old, was a resident/patient in the Alzheimer's/Dementia Unit under the care of SUNRISE DEFENDANTS at the Fountains of Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, Illinois, and entrusted herself entirely to the care of SUNRISE DEFENDANTS and their various nurses, agents, employees, and/or other medically trained personnel.

9. That on or about May 24, 2006, Plaintiff ANN JOHNSON suffered from chronic atrial fibrillation and required a daily dosage of Coumadin, an anticoagulant, which is used to control the heart rate at a normal rhythm to prevent such dangerous health risks as heart attacks, strokes and blood clots.

10. That on or about May 24, 2006, SUNRISE DEFENDANTS, during the course of Plaintiff, ANN JOHNSON'S treatment, accepted Plaintiff, ANN JOHNSON as a patient and agreed to render, by and through physicians, nurses, agents and/or

employees, competent and adequate hospital services in conjunction with her heart condition from which she was then and there suffering and SUNRISE DEFENDANTS, through its various physicians, nurses, agents and/or employees, undertook to render care, diagnosis, treatment and services for a pecuniary consideration.

11. That the dosage of Coumadin required by Plaintiff, ANN JOHNSON to properly maintain her heart rate is determined by her physician, however, it is the duty of SUNRISE DEFENDANTS, by and through their nurses, agents, servants, employees and/or licensed personnel, to ensure she is receiving the proper dosage according to doctor's orders.

12. That at all times relevant, there was a duty on the part of SUNRISE DEFENDANTS, through its nurses, agents, employees and/or licensed personnel to render to Plaintiff, ANN JOHNSON all hospital, medical and nursing care and/or services, assessments, and treatment ordinarily provided by those institutions similarly licensed and accredited under like and similar circumstances, and/or the same in accordance with the accepted standards of medical, hospital, and nursing practice and opinion prevailing in the area where services were rendered, including but not limited to following all policies and procedures and all requirements for licensure and accreditation.

13. More specifically, that at all times relevant, there was a duty on the part of SUNRISE DEFENDANTS to ensure that all medications were administered by registered nurses and/or licensed personnel in conjunction with physician's orders, to ensure that the appropriate standards of care were provided to their residents/patients, to ensure that proper procedures were followed regarding the administration of medication, to ensure that the proper dosages of medication were being administered and to ensure that

accurate records were kept regarding the dates and times of the administration of medication, so as not to put their residents/patients at an unreasonable risk of danger.

14. That notwithstanding the aforesaid duties, SUNRISE DEFENDANTS, by and through their nurses, administrators, agents, actual or apparent, employees, and/or licensed personnel, was then and there guilty of one or more of the following careless and negligent wrongful acts and/or omissions:

- a. SUNRISE DEFENDANTS carelessly and negligently allowed unqualified, untrained, and/or unlicensed nurses, administrators, agents, actual or apparent, employees, and/or licensed personnel to administer the improper dosage of heart medication to Plaintiff, ANN JOHNSON thereby resulting in Plaintiff suffering from Coumadin toxicity;
- b. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, employees, servants, and others, carelessly and negligently failed to exercise the usual and customary skill required by all assisted living healthcare facilities throughout the United States when caring for Plaintiff, ANN JOHNSON;
- c. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, employees, servants, and others, carelessly and negligently failed to follow the appropriate standards of care for all assisted living healthcare facilities throughout the United States, including adequate training and/or supervision of its nurses, employees, agents and medical staff;
- d. SUNRISE DEFENDANTS carelessly and negligently failed to keep records regarding the dates and times medication was administered to Plaintiff ANN JOHNSON, thus making it certain that the improper dosages would be consumed by Plaintiff and resulting in Plaintiff suffering from Coumadin toxicity;
- e. SUNRISE DEFENDANTS carelessly and negligently failed to heed complaints by Plaintiff's family to closely monitor the administration of Coumadin to Plaintiff thereby resulting in multiple episodes of Coumadin toxicity;
- e. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, and others carelessly and negligently failed to provide medical and hospital services to adequately treat the

condition from with Plaintiff was then and there suffering;

- f. SUNRISE DEFENDANTS through its actual and/or apparent agents, employees, servants or others, carelessly and negligently failed to render extraordinary care as described in their promotional literature and on their web site; and
- g. SUNRISE through its actual and/or apparent agents, employees, servants or others, carelessly and negligently failed to follow policy and procedure.

15. As a result of SUNRISE DEFENDANTS' negligence, Plaintiff ANN JOHNSON was injured, overdosed on Coumadin, hospitalized on two separate occasions, forced to endure pain, suffering and disability and expended valuable resources and money to cure herself from the injuries inflicted by SUNRISE DEFENDANTS.

WHEREFORE, as a result of SUNRISE DEFENDANTS' negligence, Plaintiff prays for judgment against SUNRISE DEFENDANTS' Individually, and/or by and through its residents, nurses, administrators, therapists, agents, actual and/or apparent, servants, employees and/or other medical and non-medical personnel, and/or physicians in a fair and reasonable amount inclusive of attorney's fees and costs and for such other relief as this Court deems just and proper in the premises.

Count II- (Negligence)

NOW COMES the Plaintiff, ANN JOHNSON, by and through her attorneys, HUNT, KAISER, ARANDA & SUBACH, LTD., and complaining of Defendants, FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP, a foreign limited liability partnership, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, a foreign corporation, SUNRISE SENIOR LIVING, INC., a foreign corporation, SUNRISE SENIOR LIVING MANAGEMENT, INC., a foreign corporation, SUNRISE FIRST ASSISTED LIVING

HOLDINGS, LLC, a foreign limited liability company, (hereinafter collectively referred to as the "SUNRISE DEFENDANTS"), and each of them, alleges as follows:

1. On October 14, 2007, FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP was a foreign limited liability partnership, licensed to do business in the State of Illinois, which owned and operated one or more offices in Cook County, Illinois, as well as the Fountains at Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, County of McHenry, State of Illinois.

2. On October 14, 2007, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, was a foreign corporation, licensed to do business in the State of Illinois, which owned and operated one or more offices in Cook County, Illinois, as well as the Fountains at Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, County of McHenry, State of Illinois.

3. On October 14, 2007, SUNRISE SENIOR LIVING, INC., was a foreign corporation, licensed to do business in the State of Illinois, which owned and operated one or more offices in Cook County, Illinois, as well as the Fountains at Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, County of McHenry, State of Illinois.

4. On October 14, 2007, SUNRISE SENIOR LIVING MANAGEMENT, INC., a foreign corporation, licensed to do business in the State of Illinois, which owned and operated one or more offices in Cook County, Illinois, as well as the Fountains at Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, County of McHenry, State of Illinois.

5. On October 14, 2007, SUNRISE FIRST ASSISTED LIVING

HOLDINGS, LLC, was a foreign limited liability company, licensed to do business in the State of Illinois, which owned and operated one or more offices in Cook County, Illinois, as well as the Fountains at Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, County of McHenry, State of Illinois.

6. On or about October 14, 2007, SUNRISE DEFENDANTS were an assisted living healthcare facility/medical professional corporation conducting healthcare facility, rehabilitation, medical, nursing and associated healthcare services and engaged on their staff various residents, nurses and other healthcare personnel.

7. That at all times relevant, SUNRISE DEFENDANTS held themselves out and represented that they had and possessed the requisite skill, competence, know-how, facilities, personnel, and information to properly treat Plaintiff, ANN JOHNSON.

8. That on or about October 14, 2007, Plaintiff, ANN JOHNSON, then 92 years old, was a resident/patient in the Alzheimer's/Dementia Unit under the care of SUNRISE DEFENDANTS at the Fountains of Crystal Lake location at 965 N. Brighton Circle West, Crystal Lake, Illinois, and entrusted herself entirely to the care of SUNRISE DEFENDANTS and their various nurses, agents, employees, and/or other medically trained personnel.

9. That on or about October 14, 2007, Plaintiff ANN JOHNSON suffered from chronic atrial fibrillation and required a daily dosage of Coumadin, an anticoagulant, which is used to control the heart rate at a normal rhythm to prevent such dangerous health risks as heart attacks, strokes and blood clots.

10. That on or about October 14, 2007, SUNRISE DEFENDANTS, during the course of Plaintiff, ANN JOHNSON'S treatment, accepted Plaintiff, ANN JOHNSON as

a patient and agreed to render, by and through physicians, nurses, agents and/or employees, competent and adequate hospital services in conjunction with her heart condition from which she was then and there suffering and SUNRISE DEFENDANTS, through its various physicians, nurses, agents and/or employees, undertook to render care, diagnosis, treatment and services for a pecuniary consideration.

11. That the dosage of Coumadin required by Plaintiff, ANN JOHNSON to properly maintain her heart rate is determined by her physician, however, it is the duty of SUNRISE DEFENDANTS, by and through their nurses, agents, servants, employees and/or licensed personnel, to ensure she is receiving the proper dosage according to doctor's orders.

12. That at all times relevant, there was a duty on the part of SUNRISE DEFENDANTS, through its nurses, agents, employees and/or licensed personnel to render to Plaintiff, ANN JOHNSON all hospital, medical and nursing care and/or services, assessments, and treatment ordinarily provided by those institutions similarly licensed and accredited under like and similar circumstances, and/or the same in accordance with the accepted standards of medical, hospital, and nursing practice and opinion prevailing in the area where services were rendered, including but not limited to following all policies and procedures and all requirements for licensure and accreditation.

13. More specifically, that at all times relevant, there was a duty on the part of SUNRISE DEFENDANTS to ensure that all medications were administered by registered nurses and/or licensed personnel in conjunction with physician's orders, to ensure that the appropriate standards of care were provided to their residents/patients, to ensure that proper procedures were followed regarding the administration of medication, to ensure

that the proper dosages of medication were being administered and to ensure that accurate records were kept regarding the dates and times of the administration of medication, so as not to put their residents/patients at an unreasonable risk of danger.

14. That notwithstanding the aforesaid duties, SUNRISE DEFENDANTS, by and through their nurses, administrators, agents, actual or apparent, employees, and/or licensed personnel, was then and there guilty of one or more of the following careless and negligent wrongful acts and/or omissions:

- a. SUNRISE DEFENDANTS carelessly and negligently allowed unqualified, untrained, and/or unlicensed nurses, administrators, agents, actual or apparent, employees, and/or licensed personnel to administer the improper dosage of heart medication to Plaintiff, ANN JOHNSON thereby resulting in Plaintiff suffering from Coumadin toxicity;
- b. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, employees, servants, and others, carelessly and negligently failed to exercise the usual and customary skill required by all assisted living healthcare facilities throughout the United States when caring for Plaintiff, ANN JOHNSON;
- c. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, employees, servants, and others, carelessly and negligently failed to follow the appropriate standards of care for all assisted living healthcare facilities throughout the United States, including adequate training and/or supervision of its nurses, employees, agents and medical staff;
- d. SUNRISE DEFENDANTS carelessly and negligently failed to keep records regarding the dates and times medication was administered to Plaintiff ANN JOHNSON, thus making it certain that the improper dosages would be consumed by Plaintiff and resulting in Plaintiff suffering from Coumadin toxicity;
- e. SUNRISE DEFENDANTS carelessly and negligently failed to heed complaints by Plaintiff's family to closely monitor the administration of Coumadin to Plaintiff thereby resulting in multiple episodes of Coumadin toxicity;
- e. SUNRISE DEFENDANTS by and through its actual and/or

apparent agents, and others carelessly and negligently failed to provide medical and hospital services to adequately treat the condition from with Plaintiff was then and there suffering;

- f. SUNRISE DEFENDANTS through its actual and/or apparent agents, employees, servants or others, carelessly and negligently failed to render extraordinary care as described in their promotional literature and on their web site; and
- g. SUNRISE through its actual and/or apparent agents, employees, servants or others, carelessly and negligently failed to follow policy and procedure.

16. As a result of SUNRISE DEFENDANTS' negligence, Plaintiff ANN JOHNSON was injured, overdosed on Coumadin, hospitalized on two separate occasions, forced to endure pain, suffering and disability and expended valuable resources and money to cure herself from the injuries inflicted by SUNRISE DEFENDANTS.

WHEREFORE, as a result of SUNRISE DEFENDANTS' negligence, Plaintiff prays for judgment against SUNRISE DEFENDANTS' Individually, and/or by and through its residents, nurses, administrators, therapists, agents, actual and/or apparent, servants, employees and/or other medical and non-medical personnel, and/or physicians in a fair and reasonable amount inclusive of attorney's fees and costs and for such other relief as this Court deems just and proper in the premises.

Count III- (Nursing Home Care Act)

NOW COMES the Plaintiff, ANN JOHNSON, by and through her attorneys, HUNT, KAISER, ARANDA & SUBACH, LTD., and complaining of Defendants, FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP, a foreign limited liability partnership, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, a foreign corporation, SUNRISE SENIOR LIVING, INC., a foreign corporation, SUNRISE SENIOR LIVING

MANAGEMENT, INC., a foreign corporation, SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC, a foreign limited liability company, (hereinafter collectively referred to as the "SUNRISE DEFENDANTS"), and each of them, alleges as follows:

1. That at all times relevant herein, FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP was a nursing home duly licensed to treat patients under the laws of the State of Illinois and was engaged in treating patients in Cook County, as well as other counties, and the State of Illinois.

2. That at all times relevant herein, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, was a nursing home duly licensed to treat patients under the laws of the State of Illinois and was engaged in treating patients in Cook County, as well as other counties, and the State of Illinois.

3. That at all times relevant herein, SUNRISE SENIOR LIVING, INC., was a nursing home duly licensed to treat patients under the laws of the State of Illinois and was engaged in treating patients in Cook County, as well as other counties, and the State of Illinois.

4. That at all times relevant herein, SUNRISE SENIOR LIVING MANAGEMENT, INC., was a nursing home duly licensed to treat patients under the laws of the State of Illinois and was engaged in treating patients in Cook County, as well as other counties, and the State of Illinois.

5. That at all times relevant herein, SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC, was a nursing home duly licensed to treat patients under the laws of the State of Illinois and was engaged in treating patients in Cook County, as well as other counties, and the State of Illinois.

6. That at all times relevant herein, Registered Nurses, Licensed Practical Nurses, and other caregivers were the duly authorized agents, apparent agents, servants, and/or employees of the SUNRISE DEFENDANTS who undertook to provide care and/or treatment to the Plaintiff, ANN JOHNSON, and at all relevant times were acting within the scope of their agency, service and/or employment.

7. That on or about May 24, 2006, Plaintiff ANN JOHNSON, was a resident who was admitted to SUNRISE DEFENDANTS.

8. That prior to May 24, 2006, up until the present, SUNRISE DEFENDANTS by and through their physicians, nurses, employees, agents, actual and/or apparent, and staff cared for, attended to and treated Plaintiff, ANN JOHNSON.

9. That at all times relevant herein, there was a duty on the part of SUNRISE DEFENDANTS, by and through its physicians, nurses, employees, agents, actual and/or apparent, and staff, to diagnose and render care and treatment to Plaintiff, ANN JOHNSON, in accordance with the accepted standards of nursing care practice and opinions then prevailing, and to exercise that degree and caution commonly exercised by the members of its profession.

10. That while Plaintiff was undergoing treatment, included but not limited to the administration of medication, SUNRISE DEFENDANTS had a duty to provide, by and through its physicians, nurses, employees, agents, actual and/or apparent, nursing care and medical care services ordinarily provided by similarly licensed and accredited institutions and individuals.

11. Further, that in providing these services, SUNRISE DEFENDANTS, by and through its physicians, nurses, agents, actual and/or apparent, and/or employees, had

a duty to exercise that degree of care required of similar institutions and individuals duly licensed, under similar circumstances.

12. That at all times relevant, SUNRISE DEFENDANTS, accepted Plaintiff, ANN JOHNSON, as a patient, and agreed to render competent and adequate care, diagnosis, treatment, and services to the Plaintiff, by and through its physicians, nurses, employees, agents, actual and/or apparent, for pecuniary consideration.

13. That at all times relevant, SUNRISE DEFENDANTS, accepted Plaintiff, ANN JOHNSON, as a patient, and agreed to render competent and adequate nursing care services in conjunction with her illness/heart condition, and SUNRISE DEFENDANTS, by and through its physicians, nurses, agents, actual and/or apparent, and/or employees, undertook to render such care diagnosis, treatment and services for pecuniary consideration.

14. That at all times relevant herein, Plaintiff had entrusted herself to the care of SUNRISE DEFENDANTS and its various physicians, nurses, employees, and agents.

15. That at all times relevant, there was a duty on the part of SUNRISE DEFENDANTS and its physicians, nurses, agents, and/or employees, to render all nursing care, medical care and/or assessments, services and treatments provided by those institutions similarly licensed and accredited under like and similar circumstances, in accordance with the accepted standards of medical, hospital, and nursing practices and opinions then prevailing, including but not limited to following all policies and procedures and all requirements for licensure and accreditation in Illinois.

16. That notwithstanding the aforesaid duties, SUNRISE DEFENDANTS, by and through its physicians, nurses, employees, agents and/or other related and associated

medical personnel, was then and there guilty of and committed one or more of the following careless and negligent wrongful acts and/or omissions in violation of the Nursing Home Care Act, 210 ILCS 45/2-107 rendering it liable under Nursing Home Care Act, 210 ILCS 45/3-601:

- a. SUNRISE DEFENDANTS carelessly and negligently allowed unqualified, untrained, and/or unlicensed nurses, administrators, agents, actual or apparent, employees, and/or licensed personnel to administer the improper dosage of heart medication to Plaintiff, ANN JOHNSON thereby resulting in Plaintiff suffering from Coumadin toxicity;
- b. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, employees, servants, and others, carelessly and negligently failed to exercise the usual and customary skill required by all assisted living healthcare facilities throughout the United States when caring for Plaintiff, ANN JOHNSON;
- c. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, employees, servants, and others, carelessly and negligently failed to follow the appropriate standards of care for all assisted living healthcare facilities throughout the United States, including adequate training and/or supervision of its nurses, employees, agents and medical staff;
- d. SUNRISE DEFENDANTS carelessly and negligently failed to keep records regarding the dates and times medication was administered to Plaintiff ANN JOHNSON, thus making it certain that the improper dosages would be consumed by Plaintiff and resulting in Plaintiff suffering from Coumadin toxicity;
- e. SUNRISE DEFENDANTS carelessly and negligently failed to heed complaints by Plaintiff's family to closely monitor the administration of Coumadin to Plaintiff thereby resulting in multiple episodes of Coumadin toxicity;
- e. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, and others carelessly and negligently failed to provide medical and hospital services to adequately treat the condition from with Plaintiff was then and there suffering;
- f. SUNRISE DEFENDANTS through its actual and/or apparent agents, employees, servants or others, carelessly and negligently

failed to render extraordinary care as described in their promotional literature and on their web site; and

- g. SUNRISE through its actual and/or apparent agents, employees, servants or others, carelessly and negligently failed to follow policy and procedure.

17. As a result of SUNRISE DEFENDANTS' negligent and careless acts and/or omissions, Plaintiff ANN JOHNSON was injured, overdosed on Coumadin, hospitalized on two separate occasions, forced to endure pain, suffering and disability and expended valuable resources and money to cure herself from the injuries inflicted by SUNRISE DEFENDANTS.

WHEREFORE, as a result of SUNRISE DEFENDANTS' negligence, Plaintiff prays for judgment against SUNRISE DEFENDANTS' Individually, and/or by and through its residents, nurses, administrators, therapists, agents, actual and/or apparent, servants, employees and/or other medical and non-medical personnel, and/or physicians in a fair and reasonable amount inclusive of attorney's fees and costs and for such other relief as this Court deems just and proper in the premises.

Count IV- (Nursing Home Care Act)

NOW COMES the Plaintiff, ANN JOHNSON, by and through her attorneys, HUNT, KAISER, ARANDA & SUBACH, LTD., and complaining of Defendants, FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP, a foreign limited liability partnership, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, a foreign corporation, SUNRISE SENIOR LIVING, INC., a foreign corporation, SUNRISE SENIOR LIVING MANAGEMENT, INC., a foreign corporation, SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC, a foreign limited liability company, (hereinafter collectively referred

to as the "SUNRISE DEFENDANTS"), and each of them, alleges as follows:

1. That at all times relevant herein, FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP was a nursing home duly licensed to treat patients under the laws of the State of Illinois and was engaged in treating patients in Cook County, as well as other counties, and the State of Illinois.

2. That at all times relevant herein, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, was a nursing home duly licensed to treat patients under the laws of the State of Illinois and was engaged in treating patients in Cook County, as well as other counties, and the State of Illinois.

3. That at all times relevant herein, SUNRISE SENIOR LIVING, INC., was a nursing home duly licensed to treat patients under the laws of the State of Illinois and was engaged in treating patients in Cook County, as well as other counties, and the State of Illinois.

4. That at all times relevant herein, SUNRISE SENIOR LIVING MANAGEMENT, INC., was a nursing home duly licensed to treat patients under the laws of the State of Illinois and was engaged in treating patients in Cook County, as well as other counties, and the State of Illinois.

5. That at all times relevant herein, SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC, was a nursing home duly licensed to treat patients under the laws of the State of Illinois and was engaged in treating patients in Cook County, as well as other counties, and the State of Illinois.

6. That at all times relevant herein, Registered Nurses, Licensed Practical Nurses, and other caregivers were the duly authorized agents, apparent agents, servants,

and/or employees of the SUNRISE DEFENDANTS who undertook to provide care and/or treatment to the Plaintiff, ANN JOHNSON, and at all relevant times were acting within the scope of their agency, service and/or employment.

7. That on or about October 14, 2007, Plaintiff ANN JOHNSON, was a resident who was admitted to SUNRISE DEFENDANTS.

8. That prior to October 14, 2007, up until the present, SUNRISE DEFENDANTS by and through their physicians, nurses, employees, agents, actual and/or apparent, and staff cared for, attended to and treated Plaintiff, ANN JOHNSON.

9. That at all times relevant herein, there was a duty on the part of SUNRISE DEFENDANTS, by and through its physicians, nurses, employees, agents, actual and/or apparent, and staff, to diagnose and render care and treatment to Plaintiff, ANN JOHNSON, in accordance with the accepted standards of nursing care practice and opinions then prevailing, and to exercise that degree and caution commonly exercised by the members of its profession.

10. That while Plaintiff was undergoing treatment, included but not limited to the administration of medication, SUNRISE DEFENDANTS had a duty to provide, by and through its physicians, nurses, employees, agents, actual and/or apparent, nursing care and medical care services ordinarily provided by similarly licensed and accredited institutions and individuals.

11. Further, that in providing these services, SUNRISE DEFENDANTS, by and through its physicians, nurses, agents, actual and/or apparent, and/or employees, had a duty to exercise that degree of care required of similar institutions and individuals duly licensed, under similar circumstances.

12. That at all times relevant, SUNRISE DEFENDANTS, accepted Plaintiff, ANN JOHNSON, as a patient, and agreed to render competent and adequate care, diagnosis, treatment, and services to the Plaintiff, by and through its physicians, nurses, employees, agents, actual and/or apparent, for pecuniary consideration.

13. That at all times relevant, SUNRISE DEFENDANTS, accepted Plaintiff, ANN JOHNSON, as a patient, and agreed to render competent and adequate nursing care services in conjunction with her illness/heart condition, and SUNRISE DEFENDANTS, by and through its physicians, nurses, agents, actual and/or apparent, and/or employees, undertook to render such care diagnosis, treatment and services for pecuniary consideration.

14. That at all times relevant herein, Plaintiff had entrusted herself to the care of SUNRISE DEFENDANTS and its various physicians, nurses, employees, and agents.

15. That at all times relevant, there was a duty on the part of SUNRISE DEFENDANTS and its physicians, nurses, agents, and/or employees, to render all nursing care, medical care and/or assessments, services and treatments provided by those institutions similarly licensed and accredited under like and similar circumstances, in accordance with the accepted standards of medical, hospital, and nursing practices and opinions then prevailing, including but not limited to following all policies and procedures and all requirements for licensure and accreditation in Illinois.

16. That notwithstanding the aforesaid duties, SUNRISE DEFENDANTS, by and through its physicians, nurses, employees, agents and/or other related and associated medical personnel, was then and there guilty of and committed one or more of the following careless and negligent wrongful acts and/or omissions in violation of the

Nursing Home Care Act, 210 ILCS 45/2-107 rendering it liable under Nursing Home Care Act, 210 ILCS 45/3-601:

- a. SUNRISE DEFENDANTS carelessly and negligently allowed unqualified, untrained, and/or unlicensed nurses, administrators, agents, actual or apparent, employees, and/or licensed personnel to administer the improper dosage of heart medication to Plaintiff, ANN JOHNSON thereby resulting in Plaintiff suffering from Coumadin toxicity;
- b. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, employees, servants, and others, carelessly and negligently failed to exercise the usual and customary skill required by all assisted living healthcare facilities throughout the United States when caring for Plaintiff, ANN JOHNSON;
- c. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, employees, servants, and others, carelessly and negligently failed to follow the appropriate standards of care for all assisted living healthcare facilities throughout the United States, including adequate training and/or supervision of its nurses, employees, agents and medical staff;
- d. SUNRISE DEFENDANTS carelessly and negligently failed to keep records regarding the dates and times medication was administered to Plaintiff ANN JOHNSON, thus making it certain that the improper dosages would be consumed by Plaintiff and resulting in Plaintiff suffering from Coumadin toxicity;
- e. SUNRISE DEFENDANTS carelessly and negligently failed to heed complaints by Plaintiff's family to closely monitor the administration of Coumadin to Plaintiff thereby resulting in multiple episodes of Coumadin toxicity;
- e. SUNRISE DEFENDANTS by and through its actual and/or apparent agents, and others carelessly and negligently failed to provide medical and hospital services to adequately treat the condition from with Plaintiff was then and there suffering;
- f. SUNRISE DEFENDANTS through its actual and/or apparent agents, employees, servants or others, carelessly and negligently failed to render extraordinary care as described in their promotional literature and on their web site; and
- g. SUNRISE through its actual and/or apparent agents, employees,

servants or others, carelessly and negligently failed to follow policy and procedure.

18. As a result of SUNRISE DEFENDANTS' negligent and careless acts and/or omissions, Plaintiff ANN JOHNSON was injured, overdosed on Coumadin, hospitalized on two separate occasions, forced to endure pain, suffering and disability and expended valuable resources and money to cure herself from the injuries inflicted by SUNRISE DEFENDANTS.

WHEREFORE, as a result of SUNRISE DEFENDANTS' negligence, Plaintiff prays for judgment against SUNRISE DEFENDANTS' Individually, and/or by and through its residents, nurses, administrators, therapists, agents, actual and/or apparent, servants, employees and/or other medical and non-medical personnel, and/or physicians in a fair and reasonable amount inclusive of attorney's fees and costs and for such other relief as this Court deems just and proper in the premises.

Count V- (Nursing Home Care Act)

NOW COMES the Plaintiff, ANN JOHNSON, by and through her attorneys, HUNT, KAISER, ARANDA & SUBACH, LTD., and complaining of Defendants, FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP, a foreign limited liability partnership, SUNRISE CRYSTAL LAKE (LAND) SL, LLC, a foreign corporation, SUNRISE SENIOR LIVING, INC., a foreign corporation, SUNRISE SENIOR LIVING MANAGEMENT, INC., a foreign corporation, SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC, a foreign limited liability company, (hereinafter collectively referred to as the "SUNRISE DEFENDANTS"), and each of them, alleges as follows:

1-6. Plaintiff hereby re-alleges and incorporates by reference each and every

allegation of paragraph 1-6 of Count I of this Complaint at Law as and for allegations paragraphs 1-6 of this Count V.

7. That on or about May 24, 2006 and at various times thereafter, including October 14, 2007, when SUNRISE DEFENDANTS' agents and/or employees treated and/or cared for Plaintiff, ANN JOHNSON, they were acting within their scope of employment/agency with SUNRISE DEFENDANTS and relied upon reports and information from others similarly employed by/agents of SUNRISE DEFENDANTS to render their care and/or treatment to Plaintiff.

8. That at all times relevant herein there was a duty on the part of SUNRISE DEFENDANTS to monitor their entities and/or employees, agents, actual or apparent, physicians, nurses, and medical staff to ensure that they treated Plaintiff in accordance with the accepted standards of practice prevailing in the greater metropolitan Chicagoland area, and to exercise that degree of care and caution commonly exercised by other members of their professions in the community.

9. That notwithstanding the aforesaid duties, SUNRISE DEFENDANTS, by and through its entities and/or agents, actual or apparent, servants, employees, nurses, physicians, and medical staff, assumed the care and/or treatment of Plaintiff, ANN JOHNSON, the SUNRISE DEFENDANTS, were then and there guilty, through the doctrine of vicarious liability, of and committed one or more of the following careless and negligent wrongful acts and/or omissions:

- a. SUNRISE DEFENDANTS carelessly and negligently allowed agents and/or employees to render below standards of care and services to Plaintiff;
- b. SUNRISE DEFENDANTS carelessly and negligently allowed agents and/or employees to fail to administer competent and

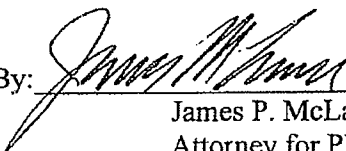
appropriate medical care and treatment to Plaintiff;

- c. SUNRISE DEFENDANTS carelessly and negligently allowed agents and/or employees to fail to monitor the dosages of Coumadin provided to Plaintiff and the amount of Coumadin consumed by Plaintiff and in her bloodstream;
 - d. SUNRISE DEFENDANTS carelessly and negligently allowed agents and/or employees to fail to follow policies and procedures; and
 - e. SUNRISE DEFENDANTS were otherwise careless and negligent.
10. As a result of SUNRISE DEFENDANTS' negligent and careless acts

and/or omissions, Plaintiff ANN JOHNSON was injured, overdosed on Coumadin, hospitalized on two separate occasions, forced to endure pain, suffering and disability and expended valuable resources and money to cure herself from the injuries inflicted by SUNRISE DEFENDANTS.

WHEREFORE, Plaintiff prays for judgment against SUNRISE DEFENDANTS' Individually, and/or by and through its residents, nurses, administrators, therapists, agents, actual and/or apparent, servants, employees and/or other medical and non-medical personnel, and/or physicians in a fair and reasonable amount inclusive of attorney's fees and costs and for such other relief as this Court deems just and proper in the premises.

HUNT, KAISER, ARANDA & SUBACH, LTD.

By: 

James P. McLane
Attorney for Plaintiff

HUNT, KAISER, ARANDA & SUBACH, LTD.
1035 S. York Road
Bensenville, Illinois 60106
(630) 860-7800
Atty. No.: 15213

STATE OF ILLINOIS)
) SS
COUNTY OF COOK)

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
COUNTY DEPARTMENT - LAW DEPARTMENT

ANN JOHNSON

Plaintiff,

v.

FOUNTAINS CRYSTAL LAKE LIMITED
PARTNERSHIP, a foreign limited liability
partnership, SUNRISE CRYSTAL LAKE
(LAND) SL, LLC, a foreign corporation,
SUNRISE SENIOR LIVING, INC., a foreign
corporation, SUNRISE SENIOR LIVING
MANAGEMENT, INC., a foreign corporation,
SUNRISE FIRST ASSISTED LIVING
HOLDINGS, LLC, a foreign limited liability
company,

Defendants.

Case Number:

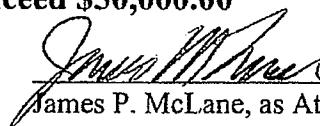
FILED-8
2008 MAY 23 PM 1:45
CLERK OF CIRCUIT COURT
LAW DIVISION
2008L005738
CALENDAR/ROOM A
TIME 00:00
PI Other

AFFIDAVIT OF DAMAGES
SUPREME COURT RULE 222

The undersigned being first duly sworn upon oath, deposes and states that he is the attorney for the Plaintiff to the above entitled cause of action and is seeking money damages for this cause of action in the amount listed below:

_____ does not exceed \$50,000.00

 X does exceed \$50,000.00


James P. McLane, as Attorney for Plaintiff

HUNT, KAISER, ARANDA & SUBACH, LTD.
1035 S. York Road
Bensenville, Illinois 60106
(630) 860-7800
Atty. No.: 15213

**Service of Process
Transmittal**

05/30/2008

CT Log Number 513478555

TO: Kim Wilburn
Sunrise Senior Living, Inc.
7902 Westpark Drive
McLean, VA 22102

RE: Process Served in Illinois

FOR: Sunrise Senior Living, Inc. (Domestic State: DE)

ENCLOSED ARE COPIES OF LEGAL PROCESS RECEIVED BY THE STATUTORY AGENT OF THE ABOVE COMPANY AS FOLLOWS:

TITLE OF ACTION: Ann Johnson, Pltf. vs. Fountains Crystal Lake Limited Partnership, etc., et al.
including Sunrise Senior Living, Inc., etc., Dfts.

DOCUMENT(S) SERVED: Summons, Complaint, Affidavit(s)

COURT/AGENCY: Cook County Circuit Court - Cook County Department - Law Division, IL
Case # 2008L005738

NATURE OF ACTION: Medical Injury - Improper Care and Treatment - Overdose of Coumadin

ON WHOM PROCESS WAS SERVED: C T Corporation System, Chicago, IL

DATE AND HOUR OF SERVICE: By Process Server on 05/30/2008 at 09:10

APPEARANCE OR ANSWER DUE: Within 30 days, not counting the day of service

ATTORNEY(S) / SENDER(S): James P. McLane
Hunt, Kaiser, Aranda & Subach, Ltd.
1035 S. York Road
Bensenville, IL 60106
630-860-7800

ACTION ITEMS: SOP Papers with Transmittal, via Fed Ex 2 Day , 790025020426
Image SOP - Page(s): 27
Email Notification, Kim Wilburn kimberly.wilburn@sunriseseniorliving.com
Email Notification, Michael Stein michael.stein@sunriseseniorliving.com

SIGNED: C T Corporation System
PER: Tawana Carter
ADDRESS: 208 South LaSalle Street
Suite 814
Chicago, IL 60604
TELEPHONE: 312-345-4336

**Service of Process
Transmittal**

05/30/2008

CT Log Number 513478659

TO: Kim Wilburn
Sunrise Senior Living, Inc.
7902 Westpark Drive
McLean, VA 22102

RE: Process Served in Illinois

FOR: Sunrise Crystal Lake (LAND) SL, LLC (Domestic State: DE)

ENCLOSED ARE COPIES OF LEGAL PROCESS RECEIVED BY THE STATUTORY AGENT OF THE ABOVE COMPANY AS FOLLOWS:

TITLE OF ACTION: Ann Johnson, Pltf. vs. Fountains Crystal Lake Limited Partnership, etc., et al.
including Sunrise Crystal Lake (Land) SL, LLC, etc., Dfts.

DOCUMENT(S) SERVED: Summons, Complaint, Affidavit(s)

COURT/AGENCY: Cook County Circuit Court - Cook County Department - Law Division, IL
Case # 2008L005738

NATURE OF ACTION: Medical Injury - Improper Care and Treatment - Overdose of Coumadin

ON WHOM PROCESS WAS SERVED: C T Corporation System, Chicago, IL

DATE AND HOUR OF SERVICE: By Process Server on 05/30/2008 at 09:10

APPEARANCE OR ANSWER DUE: Within 30 days, not counting the day of service

ATTORNEY(S) / SENDER(S): James P. McLane
Hunt, Kaiser, Aranda & Subach, Ltd.
1035 S. York Road
Bensenville, IL 60106
630-860-7800

ACTION ITEMS: SOP Papers with Transmittal, via Fed Ex 2 Day , 790025020426
Image SOP - Page(s): 27
Email Notification, Kim Wilburn kimberly.wilburn@sunriseseniorliving.com
Email Notification, Michael Stein michael.stein@sunriseseniorliving.com

SIGNED: C T Corporation System
PER: Tawana Carter
ADDRESS: 208 South LaSalle Street
Suite 814
Chicago, IL 60604
TELEPHONE: 312-345-4336

Page 1 of 1 / TC

Information displayed on this transmittal is for CT Corporation's record keeping purposes only and is provided to the recipient for quick reference. This information does not constitute a legal opinion as to the nature of action, the amount of damages, the answer date, or any information contained in the documents themselves. Recipient is responsible for interpreting said documents and for taking appropriate action. Signatures on certified mail receipts confirm receipt of package only, not contents.

**Service of Process
Transmittal**

05/30/2008

CT Log Number 513478625

TO: Kim Wilburn
Sunrise Senior Living, Inc.
7902 Westpark Drive
McLean, VA 22102

RE: Process Served in Illinois

FOR: Sunrise Senior Living Management, Inc. (Domestic State: VA)

ENCLOSED ARE COPIES OF LEGAL PROCESS RECEIVED BY THE STATUTORY AGENT OF THE ABOVE COMPANY AS FOLLOWS:

TITLE OF ACTION: Ann Johnson, Pltf. vs. Fountains Crystal Lake Limited Partnership, etc., et al.
including Sunrise Senior Living Management, Inc., etc., Dfts.

DOCUMENT(S) SERVED: Summons, Complaint, Affidavit(s)

COURT/AGENCY: Cook County Circuit Court - Cook County Department - Law Division, IL
Case # 2008L005738

NATURE OF ACTION: Medical Injury - Improper Care and Treatment - Overdose of Coumadin

ON WHOM PROCESS WAS SERVED: C T Corporation System, Chicago, IL

DATE AND HOUR OF SERVICE: By Process Server on 05/30/2008 at 09:10

APPEARANCE OR ANSWER DUE: Within 30 days, not counting the day of service

ATTORNEY(S) / SENDER(S): James P. McLane
Hunt, Kaiser, Aranda & Subach, Ltd.
1035 S. York Road
Bensenville, IL 60106
630-860-7800

ACTION ITEMS: SOP Papers with Transmittal, via Fed Ex 2 Day , 790025020426
Image SOP - Page(s): 27
Email Notification, Kim Wilburn kimberly.wilburn@sunriseseniorliving.com
Email Notification, Michael Stein michael.stein@sunriseseniorliving.com

SIGNED: C T Corporation System
PER: Tawana Carter
ADDRESS: 208 South LaSalle Street
Suite 814
Chicago, IL 60604
TELEPHONE: 312-345-4336

**Service of Process
Transmittal**

05/30/2008

CT Log Number 513478625

TO: Kim Wilburn
Sunrise Senior Living, Inc.
7902 Westpark Drive
McLean, VA 22102

RE: Process Served in Illinois

FOR: Sunrise Senior Living Management, Inc. (Domestic State: VA)

ENCLOSED ARE COPIES OF LEGAL PROCESS RECEIVED BY THE STATUTORY AGENT OF THE ABOVE COMPANY AS FOLLOWS:

TITLE OF ACTION: Ann Johnson, Pltf. vs. Fountains Crystal Lake Limited Partnership, etc., et al.
including Sunrise Senior Living Management, Inc., etc., Dfts.

DOCUMENT(S) SERVED: Summons, Complaint, Affidavit(s)

COURT/AGENCY: Cook County Circuit Court - Cook County Department - Law Division, IL
Case # 2008L005738

NATURE OF ACTION: Medical Injury - Improper Care and Treatment - Overdose of Coumadin

ON WHOM PROCESS WAS SERVED: C T Corporation System, Chicago, IL

DATE AND HOUR OF SERVICE: By Process Server on 05/30/2008 at 09:10

APPEARANCE OR ANSWER DUE: Within 30 days, not counting the day of service

ATTORNEY(S) / SENDER(S): James P. McLane
Hunt, Kaiser, Aranda & Subach, Ltd.
1035 S. York Road
Bensenville, IL 60106
630-860-7800

ACTION ITEMS: SOP Papers with Transmittal, via Fed Ex 2 Day , 790025020426
Image SOP - Page(s): 27
Email Notification, Kim Wilburn kimberly.wilburn@sunriseseniorliving.com
Email Notification, Michael Stein michael.stein@sunriseseniorliving.com

SIGNED: C T Corporation System
PER: Tawana Carter
ADDRESS: 208 South LaSalle Street
Suite 814
Chicago, IL 60604
TELEPHONE: 312-345-4336

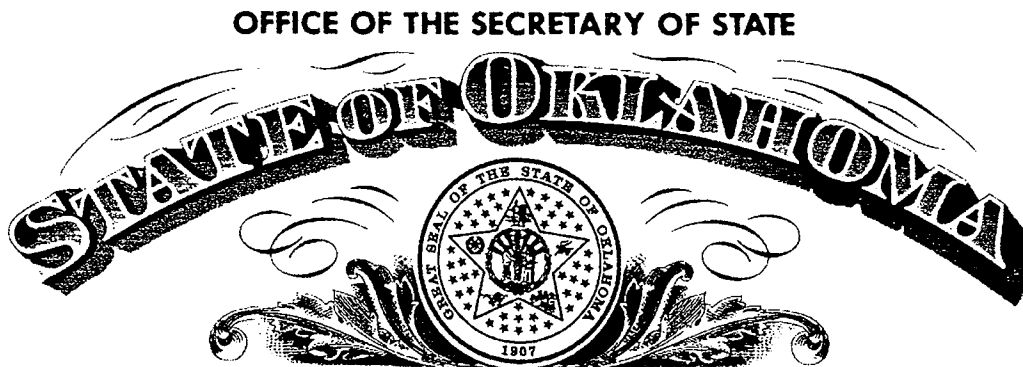
EXHIBIT 2

[SERVICES](#)[PROGRAMS](#)[PRESS](#)[PUBLICATIONS](#)[DEPARTMENTS](#)[CONTACT](#)

LP/LLLP FILE DETAIL REPORT

Entity Name	FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP	File Number	S010416
Status	VOLUNTARY CANCELLATION	As of	06/22/2006
Entity Type	LP/LLLP	Type of LP/LLLP	FOREIGN
File Date	11/22/1995	Jurisdiction	OK
Agent Name	C T CORPORATION SYSTEM	Agent Change Date	11/22/1995
Agent Street Address	208 SO LASALLE ST, SUITE 814	Designated Office	965 N. BRIGHTON CIRCLE WEST CRYSTAL LAKE IL 60012-0000
Agent City	CHICAGO	Duration	PERPETUAL
Agent Zip	60604-1101	Annual Report Filing Date	11/17/2005

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**CERTIFICATE OF CANCELLATION
OF LIMITED PARTNERSHIP**

WHEREAS, the Certificate of Cancellation of

FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP

an Oklahoma limited partnership, has been filed in the office of the Secretary of State as provided by the laws of the State of Oklahoma.

NOW THEREFORE, I, the undersigned, Secretary of State of the State of Oklahoma, by virtue of the powers vested in me by law, do hereby issue this Certificate of Cancellation terminating said Limited Partnership.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the Great Seal of the State of Oklahoma.



*Filed in the city of Oklahoma City this
7th day of June, 2006.*

M. Susan Savage

Secretary of State

06/07/2006 10:45 AM

OKLAHOMA SECRETARY OF STATE

FILED - Oklahoma Secretary of State #3300558863 06/07/2006 08:11



SOS



5249090026

CANCELLATION OF CERTIFICATE OF OKLAHOMA LIMITED PARTNERSHIP

TO: OKLAHOMA SECRETARY OF STATE
2300 N Lincoln Blvd., Room 101, State Capitol Building
Oklahoma City, Oklahoma 73105-4897
(405) 521-3912

The undersigned, for the purpose of canceling the certificate of limited partnership of an Oklahoma limited partnership pursuant to the provisions of 54 O.S, Section 311, do hereby execute and file the following Certificate of Cancellation:

1. The name of the limited partnership is:

Fountains Crystal Lake Limited Partnership

2. The date of filing of the original certificate of limited partnership November 6, 1995

3. The name of the registered agent and the address of the registered office in the State of Oklahoma is:

Frederic Dorwart	124 East Fourth Street	Tulsa	74103
------------------	------------------------	-------	-------

Name

Street Address

City

Zip Code

(P.O. Boxes are **NOT** acceptable.)

4. The reason for filing the certificate of cancellation:

Sole General Partner consent pursuant to provision of the Agreement of Limited Partnership.

RECEIVED
OK SEC. OF STATE
JUN 07 2006

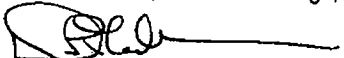
5. The effective date, which shall be a date certain, of cancellation if it is not to be effective upon filing of this certificate: _____

6. Other information, if any:

SIGNATURES OF ALL GENERAL PARTNERS

Signed and dated this 6th day of June, 2006

General Partner: Fountains CIT Holdings, L.L.C. By its Manger: Fountains Retirement Communities, L.L.C.



Signature Sr. Vice President
(List title if applicable _____)

Don P. Millican

Print or Type Name

124 East Fourth Street

Business Address

Tulsa OK 74103

City State Zip Code

Signature
(List title if applicable _____)

Print or Type Name

Business Address

City State Zip Code

NOTE: A Certificate of Cancellation must be signed by ALL general partners. A certificate being signed on behalf of a corporation shall be signed by the president or vice-president and shall not be required to be attested or sealed. (54 O.S., Section 312.A.3 & A.4)

7 2 4 0 9 7 5 0 0 0 0

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF LIMITED PARTNERSHIP

WHEREAS, the Certificate of Limited Partnership of

FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP

has been filed in the office of the Secretary of State as provided by the laws of the State of Oklahoma.

NOW THEREFORE, I, the undersigned, Secretary of State of the State of Oklahoma, by virtue of the powers vested in me by law, do hereby issue this Certificate evidencing such filing.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the Great Seal of the State of Oklahoma.



Filed in the City of Oklahoma City this 6TH
day of NOVEMBER, 1995.

Sam Cole
Secretary of State

By:

Beth Plummer

7 2 4 0 3 7 5 0 0 0 1

FILED

NOV 06 1995

**FOUNTAINS CRYSTAL LAKE LIMITED PARTNERSHIP
CERTIFICATE OF LIMITED PARTNERSHIP**

OKLA SECRETARY OF STATE

The undersigned, desiring to form a Limited Partnership under the Oklahoma Revised Uniform Limited Partnership Act, and having entered into an agreement contemplating the formation of such Limited Partnership (the "Partnership Agreement") hereby certify:

1. The name of the Limited Partnership (the "Partnership") shall be the Fountains Crystal Lake Limited Partnership.
2. The Partnership's principal place of business shall be 1400 Northwest 122nd, Oklahoma City, Oklahoma, 73114 or at such other place as the General Partner may from time to time determine, but additional places of business may be located elsewhere.
3. The name and address of the Partnership's registered agent for service of process is as follows:

Registered Agent: Frederic Dorwart
 Old City Hall
 124 East Fourth Street
 Tulsa, Oklahoma 74103-5010

4. The address at which the records of the Partnership, required to be maintained pursuant to Section 309 of the Oklahoma Revised Uniform Limited Partnership Act, are kept as follows:

Fountains Crystal Lake Limited Partnership
1400 Northwest 122nd
Oklahoma City, Oklahoma 73114

5. The name and business of the General Partner is as follows:

General Partner: Fountains Retirement Properties, inc.
 1400 Northwest 122nd
 Oklahoma City, Oklahoma 73114

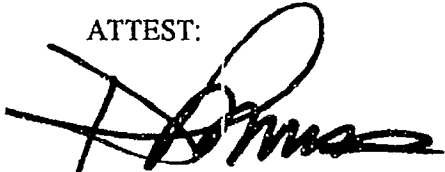
6. The terms for which the Partnership shall exist shall as among the Partners commence on November 6, 1995, and shall continue until April 15, 2041, unless it is sooner terminated pursuant to the Partnership Agreement.

7 2 4 0 3 7 5 0 0 0 2

IN WITNESS WHEREOF, the undersigned has executed this Certificate effective as among the parties hereto the 20th day of November, 1995.

GENERAL PARTNER:
FOUNTAINS RETIREMENT PROPERTIES, INC.

ATTEST:



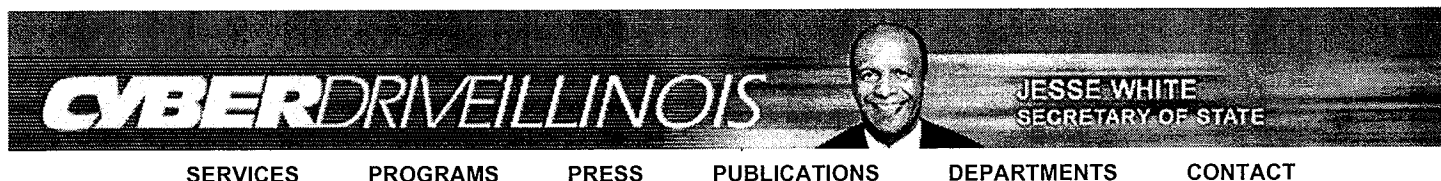
David Freshwater
Secretary of the Corporation
[SEAL]

By: Mitchell Pozez
Mitchell Pozez, President

Fountains Retirement Properties, Inc.
an Arizona Corporation

* CORPORATE SEAL *

EXHIBIT 3



LLC FILE DETAIL REPORT

Entity Name	SUNRISE CRYSTAL LAKE (LAND) SL, LLC	File Number	01605097
Status	GOODSTANDING	On	08/14/2007
Entity Type	LLC	Type of LLC	Foreign
File Date	08/25/2005	Jurisdiction	DE
Agent Name	C T CORPORATION SYSTEM	Agent Change Date	08/25/2005
Agent Street Address	208 SO LASALLE ST, SUITE 814	Principal Office	7902 WESTPARK DRIVE MC LEAN 22102
Agent City	CHICAGO	Management Type	MBR
Agent Zip	60604	Dissolution Date	PERPETUAL
Annual Report Filing Date	08/14/2007	For Year	2007
Series Name	NOT AUTHORIZED TO ESTABLISH SERIES		

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(One Certificate per Transaction)

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State of Delaware

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Department of State: Division of Corporations

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Entity Details

THIS IS NOT A STATEMENT OF GOOD STANDING

File Number:	3990243	Incorporation Date / Formation Date:	06/23/2005 (mm/dd/yyyy)
Entity Name:	SUNRISE CRYSTAL LAKE (LAND) SL, LLC		
Entity Kind:	LIMITED LIABILITY COMPANY (LLC)	Entity Type:	GENERAL
Residency:	DOMESTIC	State:	DE

REGISTERED AGENT INFORMATION

Name:	THE CORPORATION TRUST COMPANY		
Address:	CORPORATION TRUST CENTER 1209 ORANGE STREET		
City:	WILMINGTON	County:	NEW CASTLE
State:	DE	Postal Code:	19801
Phone:	(302)658-7581		

Additional Information is available for a fee. You can retrieve Status for a fee of \$10.00 or more detailed information including current franchise tax assessment, current filing history and more for a fee of \$20.00.

Would you like ☐ Status ☐ Status, Tax & History Information

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EXHIBIT 4



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Entity Details

THIS IS NOT A STATEMENT OF GOOD STANDING

File Number:	3928365	Incorporation Date /	02/18/2005
		Formation Date:	(mm/dd/yyyy)
Entity Name:	SUNRISE IV SENIOR LIVING HOLDINGS, LLC		
Entity Kind:	LIMITED LIABILITY COMPANY (LLC)	Entity Type:	GENERAL
Residency:	DOMESTIC	State:	DE

REGISTERED AGENT INFORMATION

Name:	THE CORPORATION TRUST COMPANY		
Address:	CORPORATION TRUST CENTER 1209 ORANGE STREET		
City:	WILMINGTON	County:	NEW CASTLE
State:	DE	Postal Code:	19801
Phone:	(302)658-7581		

Additional Information is available for a fee. You can retrieve Status for a fee of \$10.00 or more detailed information including current franchise tax assessment, current filing history and more for a fee of \$20.00.

Would you like ☐ Status ☐ Status, Tax & History Information

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EXHIBIT 5

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CORPORATION FILE DETAIL REPORT

Entity Name	SUNRISE SENIOR LIVING INVESTMENTS, INC.	File Number	59547097
Status	GOODSTANDING		
Entity Type	CORPORATION	Type of Corp	FOREIGN BCA
Qualification Date (Foreign)	08/14/1997	State	VIRGINIA
Agent Name	C T CORPORATION SYSTEM	Agent Change Date	08/14/1997
Agent Street Address	208 SO LASALLE ST, SUITE 814	President Name & Address	VACANT
Agent City	CHICAGO	Secretary Name & Address	JOHN F GUAL 7902 WESTPARK DRIVE MCLEAN VA 22102
Agent Zip	60604	Duration Date	PERPETUAL
Annual Report Filing Date	08/13/2007	For Year	2007
Old Corp Name	06/06/2003 - SUNRISE ASSISTED LIVING INVESTMENTS, INC.		

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2007 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

207431897
05/31/2007



① CORPORATION NAME
Sunrise Senior Living Investments, Inc

DUE DATE 05/31/07

② VA REGISTERED AGENT NAME AND OFFICE ADDRESS P CORP
CT CORPORATION SYSTEM

CORPORATE ID 0410231-5

4701 COX RD STE 301

⑤ STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

③ CITY OR COUNTY OF VA REGISTERED OFFICE
GLEN ALLEN, VA 23060-6802
143-HENRICO COUNTY

④ STATE OR COUNTRY OF INCORPORATION
VA-VIRGINIA

DO NOT ATTEMPT TO ALTER THE INFORMATION ABOVE Carefully read the attached instruction sheet Type or print in black only If item ⑥ is blank or incorrect, you must add or change the principal office address where indicated If item ⑦ is blank or incorrect, you must add or change the director and officer information where indicated

⑥ PRINCIPAL OFFICE ADDRESS

<input checked="" type="checkbox"/> Mark this box if address shown below is correct	If address is blank or incorrect, add or correct below
ADDRESS 7902 WESTPARK DR	ADDRESS
CITY/ST/ZIP MCLEAN, VA 22102	CITY/ST/ZIP

⑦ DIRECTORS AND PRINCIPAL OFFICERS

All directors and principal officers must be listed
An individual may be designated as both a director and an officer

Mark appropriate box unless area below is blank <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete information	If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Replacement
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME PAUL J KLAASSEN TITLE PRESIDENT ADDRESS 7902 WESTPARK DR CITY/ST/ZIP MCLEAN, VA 22102	OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME CHRISTOPHER J. FEENEY TITLE PRESIDENT/DIRECTOR ADDRESS 7902 WESTPARK DR CITY/ST/ZIP MCLEAN, VA 22102

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS REPORT IS ACCURATE AND COMPLETE

SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

June S. Pope, VP
PRINTED NAME AND CORPORATE TITLE

5/30/07
DATE

It is a Class 1 misdemeanor for any person to sign a document he knows is false in any material respect with intent that the document be delivered to the Commission for filing

2007 ANNUAL REPORT CONTINUED

DUE DATE: 05/31/07

CORPORATE ID: 0410231-5

All directors and principal officers must be listed
An individual may be designated as both a director and an officer

⑦ DIRECTORS AND PRINCIPAL OFFICERS (continued)

Mark appropriate box unless area below is blank <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME THOMAS B NEWELL TITLE PRESIDENT ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME CARL G ADAMS TITLE VP/TREASURER ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102	
Mark appropriate box unless area below is blank <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME JAMES S POPE TITLE VICE PRESIDENT ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME TITLE ADDRESS CITY/ST/ZIP	
Mark appropriate box unless area below is blank <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME BRADLEY B RUSH TITLE VICE PRESIDENT ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME SUSAN L TIMONER TITLE VP/ ASSISTANT SECRETARY ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102	
Mark appropriate box unless area below is blank <input type="checkbox"/> Information is correct <input checked="" type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input checked="" type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME JOHN F GAUL TITLE SECRETARY ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME JOHN F GAUL TITLE VP/SECRETARY/DIRECTOR ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102	

AF002W Rev 1 01/04

EXHIBIT 6



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Entity Details

THIS IS NOT A STATEMENT OF GOOD STANDING

<u>File Number:</u>	3938630	<u>Incorporation Date /</u>	03/11/2005
		<u>Formation Date:</u>	(mm/dd/yyyy)
<u>Entity Name:</u>	US SENIOR LIVING INVESTMENTS, LLC		
<u>Entity Kind:</u>	LIMITED LIABILITY COMPANY (LLC)	<u>Entity Type:</u>	GENERAL
<u>Residency:</u>	DOMESTIC	<u>State:</u>	DE

REGISTERED AGENT INFORMATION

<u>Name:</u>	NATIONAL CORPORATE RESEARCH, LTD.		
<u>Address:</u>	615 SOUTH DUPONT HWY		
<u>City:</u>	DOVER	<u>County:</u>	KENT
<u>State:</u>	DE	<u>Postal Code:</u>	19901
<u>Phone:</u>	(302)734-1450		

Additional Information is available for a fee. You can retrieve Status for a fee of \$10.00 or more detailed information including current franchise tax assessment, current filing history and more for a fee of \$20.00.

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Entity Details

THIS IS NOT A STATEMENT OF GOOD STANDING

<u>File Number:</u>	3938636	<u>Incorporation Date /</u>	03/11/2005
		<u>Formation Date:</u>	(mm/dd/yyyy)
<u>Entity Name:</u>	GSS (US SENIOR LIVING INVESTMENTS) INC.		
<u>Entity Kind:</u>	CORPORATION	<u>Entity Type:</u>	GENERAL
<u>Residency:</u>	DOMESTIC	<u>State:</u>	DE

REGISTERED AGENT INFORMATION

<u>Name:</u>	NATIONAL CORPORATE RESEARCH, LTD.		
<u>Address:</u>	615 SOUTH DUPONT HWY		
<u>City:</u>	DOVER	<u>County:</u>	KENT
<u>State:</u>	DE	<u>Postal Code:</u>	19901
<u>Phone:</u>	(302)734-1450		

Additional Information is available for a fee. You can retrieve Status for a fee of \$10.00 or more detailed information including current franchise tax assessment, current filing history and more for a fee of \$20.00.

Would you like ☐ Status ☐ Status,Tax & History Information

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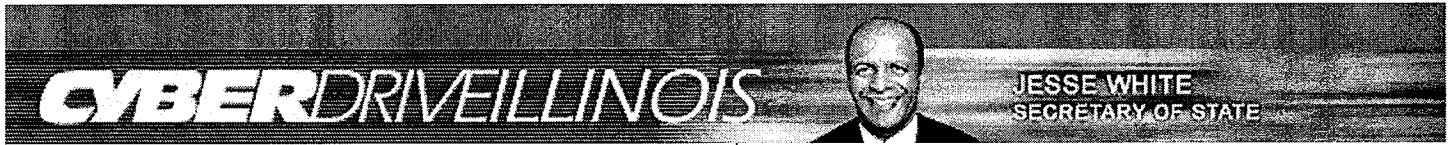
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State of Delaware

Annual Franchise Tax Report

<small>CORPORATION NAME</small>			<small>TAX YR.</small>
GSS (US SENIOR LIVING INVESTMENTS) INC.			2007
<small>FILE NUMBER</small>	<small>INCORPORATION DATE</small>	<small>RENEWAL/REVOCATION DATE</small>	
3938636	2005/03/11		
<small>PRINCIPAL PLACE OF BUSINESS</small>			<small>PHONE NUMBER</small>
c/o Global Securitizatn Svcs LLC 68 South Service Road Suite 120 Melville NY 11747 United States			631/587-4700
<small>REGISTERED AGENT</small>			<small>AGENT NUMBER</small>
NATIONAL CORPORATE RESEARCH, LTD. 615 SOUTH DUPONT HWY DOVER DE 19901			9070044
<small>BEGIN DATE</small>	<small>AUTHORIZED STOCK END DATE</small>	<small>DESIGNATION/ STOCK CLASS</small>	<small>NO. OF SHARES PAR VALUE/ SHARE</small>
2005/03/11		COMMON	100 1.000000
<small>OFFICER NAME STREET/CITY/STATE/ZIP TITLE</small>			
Frank B. Bilotta c/o Global Securitizatn Svcs LLC 68 South Service Road Suite 120 Melville NY 11747 United States President			
<small>DIRECTORS NAME STREET/CITY/STATE/ZIP</small>			
Bernard J. Angelo c/o Global Securitizatn Svcs LLC 68 South Service Road Suite 120 Melville NY 11747 United States			
Frank B. Bilotta c/o Global Securitizatn Svcs LLC 68 South Service Road Suite 120 Melville NY 11747 United States			
Kevin P. Burns c/o Global Securitizatn Svcs LLC 68 South Service Road Suite 120 Melville NY 11747 United States			
Total number of directors:3			
<i>NOTICE: Pursuant to 8 Del. C. 502(b), If any officer or director of a corporation required to make an annual franchise tax report to the Secretary of State shall knowingly make any false statement in the report, such officer or director shall be guilty of perjury.</i>			
<small>AUTHORIZED BY (OFFICER, DIRECTOR OR INCORPORATOR)</small>		<small>DATE</small>	<small>TITLE</small>
Frank B. Bilotta c/o Global Securitizatn Svcs LLC 68 South Serive Road Suite 120 Melville NY 11747 United States		2008-02-19	President

EXHIBIT 8

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CORPORATION FILE DETAIL REPORT

Entity Name	SUNRISE SENIOR LIVING, INC.	File Number	62709405
Status	GOODSTANDING		
Entity Type	CORPORATION	Type of Corp	FOREIGN BCA
Qualification Date (Foreign)	02/26/2003	State	DELAWARE
Agent Name	C T CORPORATION SYSTEM	Agent Change Date	02/26/2003
Agent Street Address	208 SO LASALLE ST, SUITE 814	President Name & Address	VACANT
Agent City	CHICAGO	Secretary Name & Address	JOHN F GAUL 7902 WESTPARK DRIVE MCLEAN VA 22102
Agent Zip	60604	Duration Date	PERPETUAL
Annual Report Filing Date	03/13/2008	For Year	2008
Assumed Name	INACTIVE - SUNRISE SENIOR LIVING		
Old Corp Name	06/16/2003 - SUNRISE ASSISTED LIVING, INC.		

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2007 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

207890855
12/10/2007



① CORPORATION NAME
Sunrise Senior Living, Inc

DUE DATE 12/28/07

② VA REGISTERED AGENT NAME AND OFFICE ADDRESS P CORP
CT CORPORATION SYSTEM

CORPORATE ID F120069-2

4701 COX RD STE 301

⑤ STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	60,000,000
PREFER	9,970,000
PREFJR	30,000

③ GLEN ALLEN, VA 23060-6802
CITY OR COUNTY OF VA REGISTERED OFFICE
143-HENRICO COUNTY

④ STATE OR COUNTRY OF INCORPORATION
DE-DELAWARE

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⑥ PRINCIPAL OFFICE ADDRESS

<input checked="" type="checkbox"/> Mark this box if address shown below is correct	If address is blank or incorrect, add or correct below
ADDRESS 7902 WESTPARK DRIVE	ADDRESS
CITY/ST/ZIP MCLEAN, VA 22102	CITY/ST/ZIP

⑦ DIRECTORS AND PRINCIPAL OFFICERS

All directors and principal officers must be listed
An individual may be designated as both a director and an officer

Mark appropriate box unless area below is blank <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information	If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>
NAME THOMAS B NEWELL	NAME
TITLE PRESIDENT	TITLE
ADDRESS 7902 WESTPARK DRIVE	ADDRESS
CITY/ST/ZIP MCLEAN, VA 22102	CITY/ST/ZIP

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS REPORT IS ACCURATE AND COMPLETE

Richard J. Nadeau
SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

Richard J Nadeau
PRINTED NAME AND CORPORATE TITLE

12/1/07
DATE

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+ 0156963 000000490 09SCCO
AF002V Rev 12 03 07

2007 ANNUAL REPORT CONTINUED

DUE DATE. 12/28/07

CORPORATE ID. F120069-2

⑦ DIRECTORS AND PRINCIPAL OFFICERS (continued)

All directors and principal officers must be listed
An individual may be designated as both a director and an officer

Mark appropriate box unless area below is blank <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME CARL G ADAMS TITLE SR VP/T ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME TITLE ADDRESS CITY/ST/ZIP	
Mark appropriate box unless area below is blank <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME PAUL J KLAASSEN TITLE CEO ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME TITLE ADDRESS CITY/ST/ZIP	
Mark appropriate box unless area below is blank <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME TERESA M KLAASSEN TITLE CHF CULTRL OFFC ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME TITLE ADDRESS CITY/ST/ZIP	
Mark appropriate box unless area below is blank <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME BRADLEY B RUSH TITLE CFO ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME Richard Nadeau TITLE CFO ADDRESS 7902 Westpark Drive CITY/ST/ZIP McLean, VA 22102	

AF00ZW Rev 1 01/04

EXHIBIT 9

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CORPORATION FILE DETAIL REPORT

Entity Name	SUNRISE SENIOR LIVING MANAGEMENT, INC.	File Number	60761523
Status	GOODSTANDING		
Entity Type	CORPORATION	Type of Corp	FOREIGN BCA
Qualification Date (Foreign)	11/09/1999	State	VIRGINIA
Agent Name	C T CORPORATION SYSTEM	Agent Change Date	11/09/1999
Agent Street Address	208 SO LASALLE ST, SUITE 814	President Name & Address	DANIEL SCHWARTZ 7902 WESTPARK DR MCLEAN VA 22102
Agent City	CHICAGO	Secretary Name & Address	JOHN F GAUL 7902 WESTPARK DR MCLEAN VA 22102
Agent Zip	60604	Duration Date	PERPETUAL
Annual Report Filing Date	11/02/2007	For Year	2007
Old Corp Name	06/06/2003 - SUNRISE ASSISTED LIVING MANAGEMENT, INC.		

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2007 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

207611058
08/10/2007



CLERK'S OFFICE

DUE DATE 08/31/07

① CORPORATION NAME
Sunrise Senior Living Management 2007 AUG 10 AM 11:47

② VA REGISTERED AGENT NAME AND OFFICE ADDRESS P CORP
CT CORPORATION SYSTEM

CORPORATE ID 0221074-8

4701 COX RD STE 301

OPERATIONS

⑤ STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

GLEN ALLEN, VA 23060-6802

③ CITY OR COUNTY OF VA REGISTERED OFFICE
143-HENRICO COUNTY

④ STATE OR COUNTRY OF INCORPORATION
VA-VIRGINIA

DO NOT ATTEMPT TO ALTER THE INFORMATION ABOVE Carefully read the attached instruction sheet Type or print in black only If item ⑥ is blank or incorrect, you must add or change the principal office address where indicated If item ⑦ is blank or incorrect, you must add or change the director and officer information where indicated

⑥ PRINCIPAL OFFICE ADDRESS

<input checked="" type="checkbox"/> Mark this box if address shown below is correct	If address is blank or incorrect, add or correct below
ADDRESS 7902 WESTPARK DRIVE	ADDRESS
CITY/ST/ZIP MCLEAN, VA 22102	CITY/ST/ZIP

⑦ DIRECTORS AND PRINCIPAL OFFICERS

All directors and principal officers must be listed
An individual may be designated as both a director and an officer

Mark appropriate box unless area below is blank <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete information	If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Replacement
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>
NAME BRADLEY B RUSH	NAME DANIEL SCHWARTZ
TITLE PRESIDENT	TITLE PRESIDENT/DIRECTOR
ADDRESS 7902 WESTPARK DRIVE	ADDRESS 7902 WESTPARK DRIVE
CITY/ST/ZIP MCLEAN, VA 22102	CITY/ST/ZIP MCLEAN, VA 22102

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS REPORT IS ACCURATE AND COMPLETE

SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

James S. Pope, VP
PRINTED NAME AND CORPORATE TITLE

7/16/07
DATE

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2007 ANNUAL REPORT CONTINUED

DUE DATE 08/31/07

CORPORATE ID. 0221074-8

All directors and principal officers must be listed
An individual may be designated as both a director and an officer

⑦ DIRECTORS AND PRINCIPAL OFFICERS (continued)

Mark appropriate box unless area below is blank <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME CARL G ADAMS TITLE T/VP ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME MARY E EDMONDSON TITLE AS ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102	
Mark appropriate box unless area below is blank <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME JAMES S POPE TITLE VICE PRESIDENT ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME TITLE ADDRESS CITY/ST/ZIP	
Mark appropriate box unless area below is blank <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME SUSAN L TIMONER TITLE VP/AS ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME TITLE ADDRESS CITY/ST/ZIP	
Mark appropriate box unless area below is blank <input type="checkbox"/> Information is correct <input checked="" type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information		If information at lower left is incorrect or blank, please mark appropriate box and enter information below <input checked="" type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement	
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME JOHN F GAUL TITLE SV, ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102		OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME JOHN F GAUL TITLE S/VP/DIRECTOR ADDRESS 7902 WESTPARK DRIVE CITY/ST/ZIP MCLEAN, VA 22102	

AF002W Rev 1 01/04

EXHIBIT 10



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LLC FILE DETAIL REPORT

Entity Name	SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC	File Number	00660566
Status	GOODSTANDING	On	12/17/2007
Entity Type	LLC	Type of LLC	Foreign
File Date	01/31/2002	Jurisdiction	DE
Agent Name	C T CORPORATION SYSTEM	Agent Change Date	01/31/2002
Agent Street Address	208 SO LASALLE ST, SUITE 814	Principal Office	10350 ORMSBY PARK PL, STE. 300 LOUISVILLE 40223
Agent City	CHICAGO	Management Type	MGR
Agent Zip	60604	Dissolution Date	PERPETUAL
Annual Report Filing Date	12/17/2007	For Year	2008
Series Name	NOT AUTHORIZED TO ESTABLISH SERIES		

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Entity Details

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<u>File Number:</u>	3484165	<u>Incorporation Date /</u>	01/24/2002
		<u>Formation Date:</u>	(mm/dd/yyyy)
<u>Entity Name:</u>	SUNRISE FIRST ASSISTED LIVING HOLDINGS, LLC		
<u>Entity Kind:</u>	LIMITED LIABILITY COMPANY (LLC)	<u>Entity Type:</u>	GENERAL
<u>Residency:</u>	DOMESTIC	<u>State:</u>	DE

REGISTERED AGENT INFORMATION

<u>Name:</u>	THE CORPORATION TRUST COMPANY		
<u>Address:</u>	CORPORATION TRUST CENTER 1209 ORANGE STREET		
<u>City:</u>	WILMINGTON	<u>County:</u>	NEW CASTLE
<u>State:</u>	DE	<u>Postal Code:</u>	19801
<u>Phone:</u>	(302)658-7581		

Additional Information is available for a fee. You can retrieve Status for a fee of \$10.00 or more detailed information including current franchise tax assessment, current filing history and more for a fee of \$20.00.

Would you like ☐ Status ☐ Status, Tax & History Information

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EXHIBIT 11



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Entity Details

THIS IS NOT A STATEMENT OF GOOD STANDING

File Number:	3965317	Incorporation Date / Formation Date:	05/05/2005 (mm/dd/yyyy)
Entity Name:	SZR US INVESTMENTS, INC.		
Entity Kind:	CORPORATION	Entity Type:	GENERAL
Residency:	DOMESTIC	State:	DE

REGISTERED AGENT INFORMATION

Name:	THE CORPORATION TRUST COMPANY		
Address:	CORPORATION TRUST CENTER 1209 ORANGE STREET		
City:	WILMINGTON	County:	NEW CASTLE
State:	DE	Postal Code:	19801
Phone:	(302)658-7581		

Additional Information is available for a fee. You can retrieve Status for a fee of \$10.00 or more detailed information including current franchise tax assessment, current filing history and more for a fee of \$20.00.

Would you like ☐ Status ☐ Status, Tax & History Information

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State of Delaware

Annual Franchise Tax Report

<small>CORPORATION NAME</small>			<small>TAX YR.</small>
SZR US INVESTMENTS, INC.			2007
<small>FILE NUMBER</small>	<small>INCORPORATION DATE</small>	<small>RENEWAL/REVOCATION DATE</small>	
3965317	2005/05/05		
<small>PRINCIPAL PLACE OF BUSINESS</small>			<small>PHONE NUMBER</small>
10350 Ormsby Park Place, Suite 300			502/357-9000
Louisville KY 40223 United States			
<small>REGISTERED AGENT</small>			<small>AGENT NUMBER</small>
THE CORPORATION TRUST COMPANY			9000010
CORPORATION TRUST CENTER 1209 ORANGE STREET WILMINGTON DE 19801			
<small>AUTHORIZED STOCK BEGIN DATE</small>	<small>END DATE</small>	<small>DESIGNATION/ STOCK CLASS</small>	<small>NO. OF SHARES</small>
2005/05/05		COMMON	100
		<small>PAR VALUE/ SHARE</small>	.010000
<small>OFFICER</small>	<small>NAME</small>	<small>STREET/CITY/STATE/ZIP</small>	<small>TITLE</small>
T. Richard Riney			
10350 Ormsby Park Place, Suite 300			Secretary
Louisville KY 40223 United States			
<small>DIRECTORS</small>	<small>NAME</small>	<small>STREET/CITY/STATE/ZIP</small>	
Richard A. Schweinhart			
10350 Ormsby Park Place, Suite 300			
Louisville KY 40223 United States			
T. Richard Riney			
10350 Ormsby Park Place, Suite 300			
Louisville KY 40223 United States			
Brian K. Wood			
10350 Ormsby Park Place, Suite 300			
Louisville KY 40223 United States			
Robert J. Brehl			
10350 Ormsby Park Place, Suite 300			
Louisville KY 40223 United States			
=====			
Total number of directors:5			
<i>NOTICE: Pursuant to 8 Del. C. 502(b), If any officer or director of a corporation required to make an annual franchise tax report to the Secretary of State shall knowingly make any false statement in the report, such officer or director shall be guilty of perjury.</i>			
<small>AUTHORIZED BY (OFFICER, DIRECTOR OR INCORPORATOR)</small>		<small>DATE</small>	<small>TITLE</small>
Brian K. Wood			
10350 Ormsby Park Place, Suite 300			
00			Treasurer & Director
			2008-02-12
Louisville KY 40223 United States			

State of Delaware

Annual Franchise Tax Report

CORPORATION NAME		TAX YR.
SZR US INVESTMENTS, INC.		2007
FILE NUMBER		
3965317		
DIRECTORS	NAME	STREET/CITY/STATE/ZIP
	Kristen M. Benson	
	10350 Ormsby Park Place, Suite 300	
	Louisville KY 40223 United States	

CERTIFICATE OF SERVICE

A copy of the **Defendants' Notice of Removal, Civil Sheet, Appearance, Answer, and Motion to Dismiss Counts, I, II, and V**, was filed electronically this **26th day of June, 2008**. Notice of this filing will be sent to all parties by operation of the Court's electronic filing system. Parties may access this filing through the court's electronic system.

ATTORNEY FOR PLAINTIFF

Mr. James P. McLane
Hunt, Kaiser, Aranda & Subach, Ltd.
1035 South York Road
Bensenville, Illinois 60106
PH:(630) 860-7800
FX:(630) 860-8283
e-mail:jpmclane@hkasltd.com

Respectfully submitted,

/s/Daniel B. Mills
PRETZEL & STOUFFER, CHARTERED
One S. Wacker Drive
Suite 2500
Chicago, IL 60606
Telephone: (312) 578-7524
Fax: (312) 346-8242
Dmills@pretzel-stouffer.com
Attorney for Defendant